

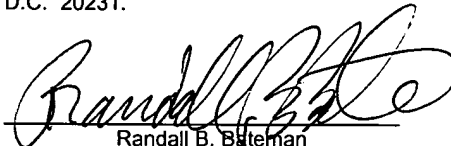


IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Scott D. Miles
SERIAL NO.: 09/836,850
FILING DATE: April 16, 2001
TITLE: **APPARATUS AND METHOD
FOR PREVENTING FREE
FLOW IN AN INFUSION LINE**
ART UNIT: 3742
EXAMINER: Daniel Leon Robinson
DOCKET NO.: 0905.ZEVX.CI

**CERTIFICATE OF MAILING
UNDER 37 C.F.R. § 1.8**

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Randall B. Bateman

12-7-04
Date of Deposit

INQUIRY AS TO STATUS OF PATENT APPLICATION

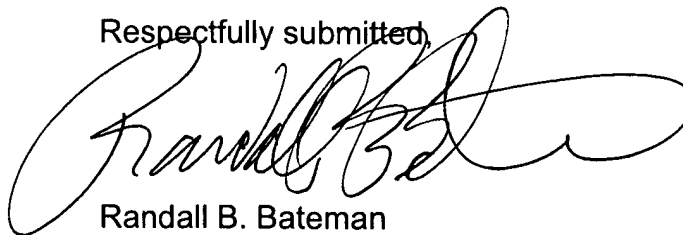
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Inquiry as to the status of the above-referenced patent application is hereby requested. No communication has been received since the receipt of the Office Action Summary on March 18, 2004. Please advise.

DATED this 7th day of December, 2004.

Respectfully submitted,



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3742
BHW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/836,850
		Filing Date	April 16, 2001
		First Named Inventor	Scott D. Miles
		Group Art Unit	3742
		Examiner Name	Daniel Leon Robinson
Total Number of Pages in This Submission	1	Attorney Docket No.	0905.ZEVX.CI

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Appeal Communication: <input type="checkbox"/> Appeal Notice <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Reply Brief <input type="checkbox"/> Assignment with Cover Sheet <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Check in the amount of \$ __ <input type="checkbox"/> Credit card authorization in the amount of \$ __ <input type="checkbox"/> Declaration & Power of Attorney <input type="checkbox"/> Drawings __ sheets <input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input type="checkbox"/> Extension of Time Request ____ month <input type="checkbox"/> Fee Calculation Table <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form 1449 <input type="checkbox"/> Copies of IDS References <input type="checkbox"/> Issue Fee Transmittal & Advance Order	<input type="checkbox"/> Maintenance Fee Transmittal ____ year <input type="checkbox"/> Missing Parts Response <input type="checkbox"/> Notification of Change of Attorney Address & Docket Number <input checked="" type="checkbox"/> Return Postcard <input type="checkbox"/> Revocation & Power of Attorney <input checked="" type="checkbox"/> Status Inquiry <input type="checkbox"/> Other:
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
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Signature		Date	12-07-04

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Signature		Date	12-07-04